## PART B - FEE(S) TRANSMITTAL

Cemplete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used correspondence includi ed below or directed of tions.	for transmitting the ISS ng the Patent, advance of herwise in Block 1, by					nould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
29177							
BELL, BOYD & LLOYD, LLP				Certificate of Malling or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop 182E PEE address above, or being facsimile transmitted to the USPTO (571) 273-2855, on the date indicated below.			
P.O. BOX 1135				tes Postal Service w	ith suff	icient postage for firs	t class mail in an envelope
CHICAGO, IL 6	50690	tras	smitted to the USP	rő (57 i	) 273-2885, on the d	ate indicated below.	
							(Depositor's name)
			_				(Signature)
							(Date)
APPLICATION NO.	ICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/511,536	10/511,536 10/15/2004		Peter Schwalbach		1	4420	
LEAST ONE TELECOM	MUNICATION ACTIV	VITY	IPRISING A SYSTEM-D				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$0 \$1700		11/05/2007
EXAM:	INER	ART UNIT	CLASS-SUBCLASS	!			
DOAN, KIET M		2617	455-418000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.56).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      □ "Fee Address" indication (or "Fee Address" indication form PTO/SB/12, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to a Tegistered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printicel.				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	e) .			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Siemens Aktiengesellschaft Muenchen, Germany							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🕏 Corporation or other private group entity 🚨 Government							
4a. The following fec(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee		A check is enclosed.					
☑ Publication Fee (No small entity discount permitted) ☑ Advance Order - # of Copies			L Payment by credit card. Form PTO-2038 is attached.  **ETThe Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0.2-1818 (enclose an extra copy of this form).				
5. Change in Entity State	is (from status indicated					<u> </u>	own copy of this folia).
	SMALL ENTITY status		Db. Applicant is no long	er claiming SMALI	ENTI	ΓY status. Sec 37 CFF	1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requestords of the United State	ired) will not be accepted es Patent and Trademark					
Authorized Signature MA TWEE				Date Octob			
Typed or printed name		Registration No. 46, 402					
This collection of informat an application. Confidentis submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22312 Under the Paperwork Redu	tion is required by 37 CI ality is governed by 35 I application form to the ns for reducing this bur- ginia 22313-1450. DO 3-1450.	R 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO, Time will vary ien, should be sent to the NOT SEND FEES OR C	n is required to obtain or re 1.14. This collection is esti- depending upon the indivi- Chief Information Officer OMPLETED FORMS TO	tain a benefit by the mated to take 12 mi dual case. Any com , U.S. Patent and Tr THIS ADDRESS.	public nutes to ments o ademar SEND T	which is to file (and be complete, including on the amount of time k Office, U.S. Depart O: Commissioner for	y the USPTO to process) gathering, preparing, and you require to complete ment of Commerce, P.O. Patents, P.O. Box 1450,

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2007.